

CLAIMS ONLY						Application Number 09/884477	Filing Date	
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1							
2		1						
3								
4	1	1						
5		1						
6		1						
7		1						
8		1						
9		1						
10		1						
11		1						
12		1						
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41		1						
42		1						
43		1						
44		1						
45		1						
46		1						
47		1						
48		1						
49		1						
50		1						
Total Indep	5							
Total Depend	25							
Total Claims	30							